§ 136a.56

§ 136a.56 Recordkeeping requirements.

Documents required by §36a.54 must be maintained for three years pursuant to the retention and custodial requirements for records at 45 CFR 74.20 *et seq*.

[47 FR 4018, Jan. 27, 1982, as amended at 65 FR 53914, Sept. 6, 2000]

§136a.57 Confidentiality.

Information which is acquired in connection with the requirements of this subpart may not be disclosed in a form which permits the identification of an individual without the individual's consent, except as may be necessary for the health of the individual or as may be necessary for the Secretary to monitor Indian Health Service program activities. In any event, any disclosure shall be subject to appropriate safeguards which will minimize the likelihood of disclosures of personal information in identifiable form.

Subpart G—Residual Status

§ 136a.61 Payor of last resort.

- (a) The Indian Health Service is the payor of last resort of persons defined as eligible for contract health services under these regulations, notwithstanding any State or local law or regulation to the contrary.
- (b) Accordingly, the Indian Health Service will not be responsible for or authorize payment for contract health services to the extent that:
- (1) The Indian is eligible for alternate resources, as defined in paragraph (c), or
- (2) The Indian would be eligible for alternate resources if he or she were to apply for them, or
- (3) The Indian would be eligible for alternate resources under State or local law or regulation but for the Indian's eligibility for contract health services, or other health services, from the Indian Health Service or Indian Health Service funded programs.
- (c) Alternate resources means health care resources other than those of the Indian Health Service. Such resources include health care providers and institutions, and health care programs for the payment of health services including but not limited to programs under title XVIII and XIX of the Social Secu-

rity Act (*i.e.*, Medicare, Medicaid), State or local health care programs and private insurance.

[55 FR 4609, Feb. 9, 1990]

PART 137—TRIBAL SELF-GOVERNANCE

Subpart A—General Provisions

Sec.

137.1 Authority, purpose and scope.

137.2 Congressional policy.

137.3 Effect on existing Tribal rights.

- 137.4 May Title V be construed to limit or reduce in any way the funding for any program, project, or activity serving an Indian Tribe under this or other applicable Federal law?
- 137.5 Effect of these regulations on Federal program guidelines, manual, or policy directives

137.6 Secretarial policy.

Subpart B—Definitions

137.10 Definitions.

Subpart C—Selection of Indian Tribes for Participation in Self-Governance

- 137.15 Who may participate in Tribal Self-Governance?
- 137.16 What if more than 50 Indian Tribes apply to participate in self-governance?
- 137.17 May more than one Indian Tribe participate in the same compact and/or funding agreement?
- 137.18 What criteria must an Indian Tribe satisfy to be eligible to participate in self-governance?

PLANNING PHASE

- 137.20 What is required during the planning phase?
- 137.21 How does an Indian Tribe demonstrate financial stability and financial management capacity?
- 137.22 May the Secretary consider uncorrected significant and material audit exceptions identified regarding centralized financial and administrative functions?
- 137.23 For purposes of determining eligibility for participation in self-governance, may the Secretary consider any other information regarding the Indian Tribe's financial stability and financial management capacity?
- 137.24 Are there grants available to assist the Indian Tribe to meet the requirements to participate in self-governance?
- 137.25 Are planning and negotiation grants available?